

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/562932

FILED DATE

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND. DEP.		IND. DEP.		IND. DEP.			IND. DEP.		IND. DEP.		IND. DEP.	
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49								99					
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TOTAL IND.			↓	4	↓			TOTAL IND.			↓		
TOTAL DEP.			←	13	←			TOTAL DEP.			↓		
TOTAL CLAIMS				17				TOTAL CLAIMS					

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